DOCUMENT RESUME

ED 348 714 EA 024 153

AUTHOR Herrington, Carolyn D.
TITLE State and Children: Relating Policy, Practice, and Finance at the State Level.
PUB DATE Mar 92
NOTE 26p.; Paper presented at the Annual Meeting of the American Education Finance Association (New Orleans, LA, March 1992).
PUB TYPE Speeches/Conference Papers (150) -- Viewpoints (Opinion/Position Papers, Essays, etc.) (120)

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS *Child Advocacy; Child Development; *Child Welfare; Educational Policy; Elementary Secondary Education; *New Federalism; Policy Formation; Public Policy; *State Aid; *State Government

ABSTRACT

The last decade has seen the convergence of three trends in the United States: a decline in the well-being of America's children; increasing overlap between the educational policy agenda and a broader policy agenda for children; and a shift in responsibility for social policy from the federal to the state level. This paper examines the current capacity of states to address children's needs, particularly in light of changing demographic and socioeconomic conditions. The first section examines the underlying philosophical, political, and administrative beliefs and structures that characterize society's responses to children. The second section reviews the current mismatch between state policymaking and the condition of children. State policies designed to improve the coordination of policies and services are analyzed in the third section. The final section outlines a proposed state-level policy framework that corresponds with knowledge about optimal child development. (31 references) (LMI)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED348714

STATE AND CHILDREN:
RELATING POLICY, PRACTICE, AND FINANCE AT THE STATE LEVEL

Carolyn D. Herrington

Learning Systems Institute

Florida State University

March, 1992

New Orleans, LA

A paper presented at the 1992 American Education Finance Association conference.

EA 024153

BEST COPY AVAILABLE

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

C. Herrington

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

ABSTRACT

The last decade has seen the convergence of three remarkable trends in the United States: a decline in the well-being of America's children, increasing overlap between the educational policy agenda and a broader policy agenda for children, and a shift in responsibility for social policy from the federal to the state level. States have thus emerged not only as the central agent for educational reform but, under the new federalism of Reaganism, also the crucial linchpin in the federalist system for addressing the needs of children writ large. An examination of the current status indicates substantial impediments to improved outcomes for children and a serious mismatch between state policy making structures and optimal child development.

The last decade has seen the convergence of three remarkable trends in the United States: a decline in the well-being of America's children, increasing overlap between the educational policy agenda and a broader policy agenda for children, and a shift in responsibility for social policy from the federal to the state level.

The status of children in the United States is changing. The percentage of children living in poverty, in single-parent homes, and in economically and socially fragmented communities is increasing. The percentage of children who come from minority backgrounds, and from homes where English is not the primary language is increasing. Furthermore, there are alarming increases in rates of unwed parenthood among teenagers, in reported child abuse and neglect, in homelessness, *in utero* exposure to drugs and in juvenile delinquency.

The implication of these changes in children's lives for the nation's schools and for the educational reform movement is profound. It is increasingly clear that the policy agenda for educational reform is tethered to a broader policy agenda for at-risk children. The intersection of educational policy with children's policy is made explicit in both definitions of educational policy issues ("educating at-risk children" or "readiness for school") and strategies for educational reform ("full-service schools," or "family/community/school partnerships").

It is equally clear that concurrent with the above trends has been a shift in the locus of social policymaking from the federal government to the statehouse. States have emerged not only as the central agent for educational reform but, under the new federalism of Reaganism, also as the crucial linchpin in the federalist system for addressing the needs of children writ large. It is to this latter point that this article addresses itself: if state governments are now the focal point for policymakers in addressing the needs of children, how capable are these "laboratories of democracy" of responding to the changing demographic and socioeconomic status of children and the conditions under which they live?

This article examines the current status of policymaking for children at the state level and recommends approaches to improved policymaking in the future. The first section examines the underlaying philosophical, political and administrative beliefs and structures that characterize society's current responses to children, and reviews the most substantial impediments to improved policies and outcomes for children; a second reviews the current mismatch between state policymaking and the condition of children. A third section analyzes state policies calculated to improve the coordination of policies and services; and the final section outlines a proposed state level policy framework that corresponds with what we know about optimal child development.

Current Policymaking Environment for Children

This section of the article examines ideological and political divisions, intergovernmental issues, and bureaucratic and professional structures that impact current policymaking at the state level.

Ideological Divisions

Children's policy development has been hampered by deep-set ideological differences on the role of government in helping those who are vulnerable. This differences represent varying philosophical beliefs about human nature and individual responsibility, political beliefs about the effectiveness of governmental interventions in the economic and social well-being of the citizenry and pragmatic concerns about what public bureaucracies can achieve and how high taxes can be raised.

Kirst (1991) has recently identified four differing approaches to governmental aid to children that have emerged over the last decade.

1. One view argues that governmental services, including services for children, create negative consequences for the recipients, often leading to increased dependency on governmental support. For example, this line of thinking would argue that higher welfare payments result in more people on welfare. A minimal role for government would, therefore, be the best policy response. As Kirst points out this view is best represented by Charles Murray's (1984) *Losing Ground*.

2. A second, more recent, view holds that negative consequences such as dependency can be avoided through governmental approaches that meet the client as a consumer and allow him to select and determine the nature and level of services through mechanisms such as cash vouchers or self-ownership. This approach presumably fosters self-determination, would be more efficient since the match between service and need is closer and would limit the growth of unresponsive bureaucracies. This view has recently found a rather full expression in the Bush Administration as articulated by Jack Kemp, Secretary of Housing and Urban Development.

3. A third approach focuses on changing behavior in dysfunctional families and articulating clearer societal norms about what is best for children. This approach acknowledges the role of material support but focuses more attention on changing adult behavior harmful for children such as child neglect and drug addiction. If maladaptive parental behavior persists, proponents of this approach argue that society should be more willing to impose sanctions such as removing the child from the home (see Finn, 1991).

4. The fourth position is that of a system approach. Adherents to this point of view argue that the current delivery system is fragmented, directionless, and

episodic (see Brewer & Kakilik, 1979 at the federal level and Romig, 1989 at the state level). According to this view, the current system slights front-end preventative measures and favors intervention when need becomes acute creating unnecessary costs. System reform under this perspective emphasizes coordination, integration, and follow-through of services to meet the needs of children and their families and, in the long run, increase efficiency (see Hodgkinson, 1989; Schorr, 1988 and Levy, 1989).

Ideological cleavages such as these run deep and can result in impasses in which no governmental action is taken on behalf of children and their families or in governmental programs which are internally self-contradictory.

Political Polarization

At the political level, conservative and liberal policy development has been polarized. At the risk of over-simplification, it can be said that during the last thirty years, liberals have focused on the economic plight of children and their families neglecting the issue of family values while conservatives have stressed values but downplayed economic issues:

> Liberals tend to reach for bureaucratic solutions even when they are counterproductive; conservatives tend to reject government responses even when they would work... Traditional conservatives' support for families is largely rhetorical; their disregard for new economic realities engenders a policy of unresponsive neglect... Conversely, traditional liberals' unwillingness to acknowledge that intact two-parent families are the most effective units for raising children has led them into a series of policy cul-de-sacs (Kamarck & Gaston, 1990, p. 3).

Intergovernmental and Public/Private Divisions

Policies and programs for children are increasingly being formulated, funded, and operated within an intergovernmental context. The federal, state, and local governments all have major and overlapping functions in developing policies, regulating service delivery, determining eligibility, and raising revenues to meet the needs of children. Some researchers have argued that the inability to manage the intergovernmental context may be the most serious impediment to improved conditions for children (Pizzo, 1983).

Federal Government. The federal government plays a dominant role in enabling children's services through its greater capacity to generate revenue. Services provided through major federal programs such as Medicaid, Aid to Families with Dependent Children, Special Supplemental Food Program for Women, Infants and Children, Head Start, and Chapter One constitute large-scale fiscal and programmatic resources. Some programs such as Medicaid and AFDC are federal-state matching programs with state-level decisions regarding level and nature of services made within the parameters of broad federal guidelines.

State Government. States fund, regulate, and deliver many children's services. For example, the state in conjunction with local governments, is the largest funder of the most pervasive children's service - education. It funds and delivers many other children's services, such as public health services, child protection systems, developmental services and, in conjunction with the federal government, the major welfare programs.

Local Governments. Local governments - counties, cities, and special purpose governments - are responsible for the maintenance and quality of the environment

that children grow up in. They build and regulate the local systems of transportation, housing, community and health. They deliver large numbers of specific programs which serve children such as parks and recreation, housing, libraries, childcare, homeless shelters, and others.

Private Agencies. In addition to the public sector, the U.S. has a much older tradition of children's services being offered through private agencies, mostly privately operated and funded, even though increasingly receiving some funding from local and state governmental sources. This category encompasses a broad array of services and programs including Girl and Boy Scouts, religious services, United Cerebral Palsy, YMCA, and Easter Seals (Cremin, 1988).

The sheer magnitude and complexity of the intergovernmental array of services impacting children is a barrier to sound policy. Shifts in funding levels, regulatory requirements and the political constituencies behind them have a rippling effect throughout the intergovernmental system, confusing and often bewildering policymakers and service providers. Increasingly sound policy development at the state level requires an understanding of and an ability to manage the interplay of federal, state and local governments, and private sector agencies (Herrington, 1990).

Bureaucratic Divisions

In addition to the vertical segregation of children's programs in the federalist system, a horizontal segregation exists in the executive agency structures responsible for regulating and delivering services. Bureaucratic structures divide responsibilities among differing sectors such as health, and social services, and then further sub-divide into section offices such as services for the blind, for teenage parents, for the developmentally disabled, or for status offenders. To the degree that these different

bureaus regulate different programs, there exist a series of separate, parallel and uncoordinated regulatory frameworks. This fragmented regulatory structure results in discrete funding streams and professional parochialism, and is subject to the varying influence of historical precedent, political influence of differing constituency groups and the commitment of powerful politicians. These forces result in some programs being generously funded while others are chronically underfunded; in some programs having universal eligibility while others are means-tested; and in some programs being entitlements while others are first-come, first-served until the annual allocation of funds runs out. This horizontal segregation is repeated at all governmental levels - federal, state, and, in a more limited way, local governments.

Professional Divisions

The bureaucratic divisions reflect and are shaped by differences in the professional orientation of the service providers. Physicians, child abuse investigators, public health nurses and educators have widely varying norms of professional conduct regarding protocol, professional license, relation to client, and professional ethics. For example, physicians and state attorneys relate differently not only to their clients, but also to the governmental offices with which they are affiliated.

These divisions - ideological, political, governmental, organizational, and professional - are deeply imbedded in the policymaking environments which govern children's issues. They can result in policy initiatives being aborted, stillborn, poorly constructed, or inadequately implemented.

Mismatch Between State Policymaking and the Condition of Children

As a result of barriers and division among policymakers, constituency groups and professionals and among different policy approaches, current policymaking for children at the state level is severely deficient. In most states fundamental

misalignments exist between the needs of children and the state's policy and service infrastructure. The following section explores three broad areas in which current state policy structure is deemed out of line with the condition of children and explores the reasons accounting for the mismatch.

Lack of Cohesion in Policy Development

Most state policies toward children date back to the 1800s or earlier with the establishment of state school systems. In the first part of the twentieth century, almost all states established a mother's pension program to provide resources for mothers who lacked the means to support their children, enabling them to not have to place their children in residential care. (These state policies were the precursors to the 1936 Social Security Act's provisions for aid to dependent children.) State policies have continued to be developed and services expanded throughout most of the century. Today's policies are the accumulation of decades of concerns, pressures, and reframing of what children need and what the state should provide. A cursory analysis reveals the *ad hoc* nature of the array of policies and services.

Lack of state philosophy. Most states lack any unified, coherent and consistent statement of philosophy, goals or values regarding children. Statutory intent and programmatic objectives may occur in numerous places throughout the law, but there is often lacking any one statement of an over-riding or integrated philosophy.

Incremental policymaking. State policies develop incrementally and in response to specific issues: foster care reform may result from a scandal involving abuse of a child in a foster home, a particular legislator's special interests may drive policymaking for the duration of his or her term, or media coverage of a particular egregious incident may result in a flurry of policymaking activity. The result is a

hodgepodge of at best unrelated and at worst contradictory policies and programs.

Fragmented executive structure. Policies thus developed are then fed into a executive implementation structure that is often fragmented and diffused. In most states, responsibility for children's programs are located primarily in the education and human services departments. However, other departments may have responsibilities in other areas of children's services. These departments may include law enforcement, corrections, or labor. A third set of departments may exercise considerable though indirect influence on children's lives: departments of professional regulation usually define professionals which may serve children; departments which house growth management regulatory responsibilities such as departments of community affairs have extensive influence on children's quality of life and departments of transportation which rarely have explicit children's policies may be formulating decisions which have considerable impact on children.

Flaws in Policy Substance

Policies as currently incorporated in state laws and administrative codes fail to align with the needs of children by failing to deal with the child holistically or continuously. Policies force the fragmentation of service delivery into categories that artificially block off aspects of a child's condition and permit the delivery of services only for discrete periods of time and only for specific manifesting conditions and then fail to provide for transition of the child from one stage to another.

Categorization. The primary failure in current policies at the state level (as is the case at every level) is the categorization of services (National Commission on Children, 1991; U.S. General Accounting Office, 1985). Children's services are conceptualized, defined, funded and delivered in discrete categories such as income

support, nutrition, medical care, childcare or education. This categorization is enforced by a regulatory framework that includes federal, state, and local policies, administrative codes, prescriptive eligibility requirements, funding streams, and administrative reporting and evaluation cycles.

Categorization is not without its advantages. It has been argued that it helps insure quality of services, public acceptance, political accountability and allows for the competition of new ideas (Bruner, 1991; Lazar, 1991). However, the extent of specialization has clearly exceeded the presumed benefits. The act of labeling children, in itself, may have detrimental effects on the child's self-perception and the perception of his family and professionals. Labels are highly arbitrary constructs, and convenience rather than accuracy is often the rationale for a child receiving one rather than another label. In many instances, labeling may be the only way to access services for a child causing an approximate label to be selected. However, once labeled, a child may end up receiving an inappropriate level or mix of services, introducing inefficiencies in a system that is chronically underfunded (Meisels & Provence, 1989).

Another problem with categorization is that often a child is physically, socially or psychologically removed from the mainstream of children to receive services and this very isolation may be pernicious. Particularly for a child who is only marginally exceptional from his peers, it may further remove him from the stimulation and positive influence of his age and skill level peers. Thus, the very treatment system itself marginalizes a child whose problems otherwise may be slight and responsive to mild, less costly interventions.

Lack of continuity over time. The compartmentalization of care occurs not just across different programs but over time. Care is often episodic, discontinuous and gap-ridden. A marginal child whose condition improves as a result of services may

become ineligible for services until the situation deteriorates again. The growing age of a child may disqualify him for one set of services and then re-enter him in a different complex of services with little or no transitioning. Often records have to be redone, diagnostic tests repeated, and visits to agency offices required repeatedly (Meisels & Provence, 1989).

Lack of data. All of the problems of categorization and discontinuities and the resulting poor match between services and needs are aggravated by a lack of integrated data systems to track the children who need help, their families, and the programs they enter. The absence of unified, useful information systems for practitioners and administrators prevents better service coordination and integration. The reasons for these data deficiencies are several, but the volume and volatility of key indicators as well as the failure to achieve data integrity from the data entry stage are important ones (Streit, 1991).

Crisis-oriented. As currently constituted, the children's system is consistently responsive only to children whose conditions are acute and usually have been aggravated over time.

An optimal continuum of policy would include prevention, screening, intervention and acute care (see Keogh, Wilcoxen, & Bernheimer, 1986). Unfortunately, states policies are inadequate, disparate, and discontinuous at the preventive end of the continuum and highly responsive only at the acute end after considerable damage to a child may already have occurred and remediation may no longer be possible. The most graphic example of this is underfunding of relatively inexpensive community-based prenatal programs and provision of extremely expensive neonatal intensive care units in tertiary care hospitals.

Transition from a crisis-oriented system to a prevention-and early

intervention-oriented one is not politically or substantively easy (Healy, Keesee, & Smith, 1985). It would inevitably result in short and maybe mid-term increases in cost as both programs may need to be funded during the transition period. Also, intervention in times of crisis has a compelling moral imperative not easily abridged, no matter how costly. Thirdly, the research base on prevention, early intervention and treatment is insufficient in many areas. For example, many educational curricula designed to prevent dropping out, teenage pregnancy, and drug abuse are unproven. Many screening processes to help identify children at risk for abuse, developmental delays, or learning disabilities either over- or under-identify children (Meisels & Wasik, 1990). Unnecessary interventions triggered by the screening are not only wasteful, but may undermine parental control and self-confidence and compromise public acceptability.

Lack of Accountability

The weaknesses in the process of policy development and the content of the policies themselves too often result in poor outcomes for the children, their families and the state. There are three clear areas where outcomes are compromised.

Lack of outcome data. Many children's programs and services lack even rudimentary accountability systems. States simply do not know what happens to children as a result of many of their programmatic interventions. Even when data are available, it is often impossible to determine the impact of the intervention on the present status of the child. The fragmentation and chronic underfunding of children's services combined with inadequate data systems exacerbate the problem. The only children's service with a somewhat adequate accountability system is the education sector, where some states maintain comprehensive and continuous data on the child's educational progress. In other sectors such as child care, nutrition,

and the legal system, outcome indications may not even exist; if so, they are inconsistently and inadequately measured. The lack of accountability results in a paucity of feedback to policymakers to help guide them to fund the most effective programs and undermines public credibility and support.

A recent attempt in the State of Florida's Office of Children, Youth and Families to administer a legislatively-mandated outcome evaluation system for all programs and services, whether publicly administered or privately operated, has met with mixed results. While substantial progress has been made in establishing data collection and reporting systems, the outcome evaluation initiative has highlighted the difficulty in gaining consensus on outcome measures and in developing mechanisms for using outcome data along with other input for making administrative and political decisions on program funding, continuation or elimination (Streit, 1991).

Sub-state regional inequities. Another basic flaw in the current system (or non-system) is the persistence of inequities in program quality , access and support levels across different regions of the state. While the courts have shown little tolerance for inequities in school funding across districts, serious and pervasive inequities in overall services for children from region to region have remained (Kirst, 1991). Regional inequities persist because of differing administrative abilities, political influence and historical precedent.

State/local relations. Finally, responsibility for services is diffused between the state and local levels of government. There has been no "sorting out" of roles and responsibilities. Both levels of government feel that they end up "picking up" responsibility because no one else will. The role of local governments (counties, cities, special purpose governments), and local private agencies (coordinating

groups such as United Way or single-issue groups such as the Association for Retarded Citizens) are not well defined locally or intergovernmentally. The result is duplication in some areas and gaps in others (Agranoff, 1986).

Lack of Adequate and Stable Funding

Lack of state funding. Funding for most children's services has been chronically insufficient and unstable. Levels of funding are often less associated with level of need than with historical precedent (reflecting children's services originations in community-based philanthropy). Education is the only entitlement program among the solely state-funded programs. The National Commission on Children's analysis of major funding streams for children at the state and local level show that education accounts for over 70% of state and local government expenditure for children (Juffras & Steuerle, 1989).

Equity in funding. Equity is a major concern for financing of children's services. As noted substantial inequities exist across regions of the state and across programs. The per-child level of funding for a program in one part of the state may be substantially higher than the same program in another locale. Historical accident and political influence may determine regional funding variations more so than degree of need. Per-child funding may also vary considerably across programs as well as across regions. For example, the lack of fiscal equity is evident in many states' child care programs. State-subsidized child care, Head Start and school-based pre-kindergarten early intervention programs in some states may be funded at substantially different levels though they provide similar services to similar types of children (Muenchow, 1991).

State-level Strategies To Improve Children's Services

As concern for children's well-being has heightened over the last few years, a number of strategies to improve the quality and efficiency of children's services have emerged. While few are new to either public policy or to children's concerns in particular, what is new is the strengthening conviction that the current delivery system is inadequate and that new units of organizational, bureaucratic, professional, and fiscal structures are required. The following is a catalogue of strategies currently being tried in some states or recommended by policy analysts specializing in children's issues.

Interagency Planning and Policy Committees

One executive strategy is to structure the planning functions such that all agencies serving children are required to develop policies and programs in conjunction with the other agencies that have responsibility for children's services. This approach is promising and not difficult to implement but its effects are limited to planning and not service delivery (Kirst, et al., 1989)

Consolidated Human Service Departments

Locating all human services in one executive department presumably promotes consistency and efficiency in prioritizing issues, developing policy, and operating programs. This executive strategy to channel policy and programming through one super-agency has been tried in many states and at the federal level. The U.S. Health, Education, and Welfare Department (HEW) is the most well-known example. However, it is possible that such arrangements may only recreate the same divisions among professionals and across issues that plague current policymaking. The only difference is that the divisions shift from the departmental to the bureau level (Lazar, 1991)

Children's Budgets

Examining children's policies and services as reflected in budgetary decisions is one method for determining with some precision the level and nature of services offered by a state. Such analysis also helps determine actual levels of service versus authorized levels and can display, with striking clarity sometimes, actual priorities in state policy versus stated priorities. However, execution has been problematic. (Kirst et al., 1989). Financial management information systems are often not set up to track the flow of dollars in ways useful for such policy analysis (Robertson, 1989)

Special Interest Departments

A further strategy for consolidating children's programs is to house them within their own single-purpose department. While such consolidation provides clear identification of children's programs and accountability for provision of services, the isolation of such an agency from other more powerful constituencies may weaken its political base and make it more vulnerable to budgetary cuts or shifts in political alliances (Lazar, 1991) Also, for many programs such as AFDC and Medicaid, eligibility resides with the parent or family as the administrative unit and is not a children's program *per se*.

Case Management

Mandating cooperation at the point of service delivery is another approach to achieving increased coordination among agencies and improved responsiveness to the individual needs of children. Case management allows each individual child's needs to be assessed by a third party who then outlines a service plan drawing upon all the resources and funding streams available in the community and as dictated by

the assessment of the child. On the positive side, effective case management enhances the accountability of services with a clear focus on the needs and outcomes for individual children. On the other side, however, there must be a willingness to invest the level of resources and administrative support essential for case management to work.

Co-location

Co-location is the siting of existing services at the same locale to facilitate access for children and their families. Like case management, this approach does not require as much integration among existing service providers and thus may be administratively and politically easier to implement.

Innovative integration projects

Another approach is for a state to target specific communities and programmatic objectives and specifically fund such projects. Often this selection will be dependent on the "readiness" of the community to deliver comprehensive services to children and may require federal or state waivers of regulatory restrictions. Observation of these special projects may serve to provide direction for future state initiatives. (Kirst, et al, 1989)

Restructuring financing

A final alternative for states is to investigate structures imposed by fiscal requirements and possibilities for improved levels of service or comprehension of services through redesigning funding methods and requirements. Requiring special attention would be the large federal and federal/state funding streams such as Medicaid, Maternal and Child Health, JOBS, Chapter One, AFDC, and drug abuse prevention along with local resources such as the property tax.

Future Policy Directions

A number of components currently lacking in most states need to be set in place before a state can build a coherent, equitable and sufficiently funded continuum of services for children. The following six components would provide a strong foundation for further policy formulation.

A Comprehensive Executive Policy and Planning Structure

States need to locate a policy formulation, coordination and oversight capacity dedicated to children's issues in one central site within the executive branch. The site would be a single focal point to recommend policies as new issues emerge, coordinate policies currently under the aegis of numerous executive agencies, monitor the effectiveness and on-going responsiveness of existing programs and examine the impact on children of policies in areas that do not explicitly deal with children's issues. The state of California has recently created such an office under the Governor.

Intergovernmental Policy Development

A formal process for sorting out the relative responsibility among governments--local, special purpose, state and federal--for addressing policies of children is needed. Currently, intergovernmental relations proceed by mischance and misdirection. While all three levels of government have been very active in the last few years in reexamining existing policies and forging new ones, a rational basis for the distribution of responsibilities across levels remains elusive. The greater revenue-generating capacity of higher levels of government needs to be exploited while retaining programmatic decision-making authority under the aegis of

governments closest to the communities in need. Furthermore, though states have only limited control over federal policymaking, it can exact influence through state congressional delegation and through organizations such as the National Conference of State Legislatures and National Governors' Association.

In their relations with local governments, states need to encourage the development of integrated and comprehensive local planning and service delivery capacities. Relations, roles and responsibilities among local governments, sub-state districts -- such as regional planning councils, and special purpose governments such as school districts and children's services councils -- need to be worked out.

At the delivery point, mechanisms need to be in place to assure that the services provided locally are timely, comprehensive, integrated and responsive to the needs of the children. Furthermore, the impact on the child and the effectiveness of the interventions need to be monitored overtime. And this information needs to be fed back to the different governments to aid their future policymaking.

Bringing Projects Up-to-Scale

Many states have been successful in developing a limited number of exemplary programs that incorporate basic features such as comprehensiveness, integration, timeliness and responsiveness. However, breaking out from a project basis to widespread replication has proven difficult administratively and fiscally (see Schorr, 1988). The expansion of projects with documented success should be monitored and facilitated as a part of a more comprehensive, cohesive approach to policymaking.

Financial Restructuring

The majority of funds explicitly designated for children in need reside in a small number of federal and federal/state programs. Greater effort is needed to more

fully exploit the revenues available to states from these sources and to assure that the guidelines controlling utilization of these funds are closely tailored to the needs of children in an individual state.

The federal government has shown some willingness to grant waivers to existing restrictions on use of funds and to otherwise assist states in restructuring their intergovernmental flow of funds to allow the states to more closely align the use of the money with the needs of children (Bane, 1990). Likewise, the state needs to examine the restrictions it places on local use of funds to assure that the restrictions are in the best interest of children.

Need for an Outcome-Based Indicator System

The adequacy of a state's substantial commitment to help children remains unknown due to the lack of any consensus on what outcomes are feasible and desired. States lack both indicators to measure outcome and consensus on what standards can or should be applied. In the absence of an outcome-based indicator system, the political will to fund needed services and the administrative competence to select the most efficient interventions are confounded and public credibility is undermined. Efforts are occurring nationally and in selected states to develop and adopt outcomes for families and children across the age span of childhood and across the domains of physical, social, emotional, and cognitive conditions. While not fully developed, the technology to measure the status of children is improving rapidly. Further work remains in developing consensus on desired outcomes.

Conclusion

The interdependence of reform in education and reform for children's policies make it critical that good intention be accompanied by sound policy formulation at the state level. To achieve a responsive, coordinated and comprehensive policy

framework for children will require more than "fixing" the current system or raising funding levels. States will need to fundamentally rethink their policy structures and the relations among children's policies, educational policy and what we know about optimal child development.

REFERENCES

Agranoff, R.J. (1986). *Intergovernmental management*. Albany, NY: State University of New York Press.

Anton, T.J. (1989). *American federalism and public policy: How the system works*. Philadelphia, PA: Temple University Press.

Bane, M.J. (1990). *The Federal role in improving services*. Cambridge, MA: Harvard University, John F. Kennedy School of Government, Malcolm Weiner Center for Social Policy.

Brewer, G.D. & Kakalik, J.S. (1979). *Handicapped children: Strategies for improving services*. New York, NY: McGraw-Hill.

Bruner, C. (1991). *Thinking collaboratively*. Washington, DC: Education and Human Services Consortium.

Chambers, R. (1991). Medicaid waivers: More flex in state health care "muscle". Paper presented at the 1991 National Conference of State Legislatures, Orlando, FL.

Cremin, L.A. (1988). *American education: The metropolitan experience: 1876-1980*. New York, NY: Harper & Row.

Finn, C. (1991). *We must take charge: Our schools and our future*. New York, NY: Free Press.

Gans, S.P. & Horton, G.T. (1975). *Integration of human services: The state and municipal levels*. New York, NY: Praeger.

Hanson, J.E. (1983). "The case of intergovernmental relations: Values and effects. In E.F. Zigler, S.L. Kagan, & F. Klugman (eds.), *Children, families, and government: Perspectives on American social policy* (pp. 117-143). Cambridge, MA: Cambridge University Press.

Herrington, C.D. (1990). "Public policy and children." Paper presented at the Association of Public Policy and Management, San Francisco, CA.

Herrington, C.D. (1991). *The condition of children in Florida*. Tallahassee, FL: Center for Policy Studies in Education.

Hodgkinson, H.H. (1989). *The same client: The demographics of education and service delivery systems*. Washington, DC: Institute for Educational Leadership.

Juffras, J. & Steuerle, E. (1989). Public expenditures on children, fiscal year 1989. Paper presented to the National Commission on Children, Airlie, VA, November.

Kamarck, E.C. & Gaston, W.A. (1990). "Putting children first: A progressive family policy for the 1990s." Washington, DC: Progressive Policy Institute.

Keogh, B.K., Wilcoxen, A.G., & Bernheimer, L. (1986). Prevention services for risk children: Evidence for policy and practice. In D.C. Farran & J.D. McKinney (eds.), *Risk in intellectual and psychosocial development* (pp. 287-316). Orlando, FL: Academic Press.

Kirst, M.W. et. al. (1989). *The condition of children in California*. Berkeley, CA: Policy Analysis for California Education.

Kirst, M.W. (1991). "Integrating children's services." Menlo Park, CA: EdSource.

Lazar, I. (1991). "Notes on a framework for care." Unpublished paper. Ithaca, NY: Author.

Levy, J.E. (1989). *Joining forces: A report from the first year*. Alexandria, VA: National Association of State Boards of Education.

Meisels, S.J. & Provence, S. (1989). *Screening and assessment: Guildelines for identifying young, disabled, and developmentally vulnerable children and their families*. Washington, DC: National Center for Clinical Infant Programs.

Meisels, S.J. & Wasik, B.A. (1990). Who should be served? Identifying children in need of early intervention. In S.J. Meisels & J.P. Shonkoff (eds.), *Handbook of early childhood education* (pp. 605-632). Cambridge, MA: Cambridge University Press.

Muenchow, S. (1991). Child Care. In C. Herrington (ed.), *The condition of children in Florida*. Tallahassee, FL: Center for Policy Studies in Education.

Murray, C. (1984). *Losing ground: American social policy 1950-1980*. New York, NY: Basic Books.

National Commission on Children. (1991). *Beyond rhetoric: A new American agenda for children and families*. Washington, DC: Author.

Pizzo, P. (1983). "Slouching toward Bethlehem: American federal policy perspectives on children and their families," in *Children, families and government: Perspectives in American social policy*. Cambridge, MA: Cambridge University Press.

Robertson, G. (1989). "Budget strategies for enhancing service to infants and toddlers." Tallahassee, FL: Center for Policy Studies in Education.

Romig, C., Ed. (1989). *Family policy: Recommenations for state action*. Denver, CO: National Conference of State Legislatures.

Schorr, L.B. (1988). *Within our reach: Breaking the cycle of disadvantage*. New York, NY: Doubleday.

Streit, S. (1991). Vulnerable children and the law. In C. Herrington (ed.), *The condition of children in Florida*. Tallahassee, FL: Center for Policy Studies in Education.

U.S. Government Accounting Office. (1985). *Block grants: Overview of experiences to date and emerging issues*. Washington, DC: Government Printing Office.